

**Work Order ID** 108668

Monday, October 28, 2013 10:09:51 AM

D 2 2 3 0 - 3

B 1 0 8 6 6 8

\*108668\*

Page 1

**Item ID:** D2230-3

Accept

\*N900040100\*

Setup Start

\*NS1\*

**Revision ID:**

**Item Name:** Mounting Lug

Stop

\*NS2\*

**Start Date:** 10/28/2013 **Start Qty:** 257.00

\*257\*

Cust Item ID:

**Required Date:** 10/31/2013 **Req'd Qty:** 257.00

\*257\*

Customer:

**Reference:**

**Approvals:**

Process Plan: CL

Date: 13/10/28 Tooling:

Date:

Run Start

\*NR1\*

QC:

Date: SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2230	Rev G								
110	Outsource process - Machining	0.00							
*110*	HAAS CNC VERTICAL MACHINING #1								
Outsource5	Memo	0.00							
Outsource process - Machining	Issue P/O to Metec : 21848								
	Machine as per dwg								
	C of C is required								
120	Receive & Inspect for Damage & Mat'l Certs	0.00							
*120*	Memo	0.00							
Packaging	Ensure C of C is attach								
130	QC6- Inspect dimensions to drawing	0.00	DAS 27 9-89						
*130*	Memo	0.00	15.11.01						
QC									
Quality Control									

CL 13/10/28 257

13/10/28 257

257  
Count

NCR: Yes / No

## **WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
				Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
				Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
				Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							



NCR: Yes / No

# **WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: Date:

QA Closed: Date:

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
				Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
				Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
				Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							

**Work Order ID 108668**

Monday, October 28, 2013 10:09:51 AM

**\*108668\***

Page 3

**Item ID:** D2230-3

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

**Revision ID:**

**Item Name:** Mounting Lug

Stop

**\*NS2\***

**Start Date:** 10/28/2013 **Start Qty:** 257.00

**\*257\***

**Cust Item ID:**

**Required Date:** 10/31/2013 **Req'd Qty:** 257.00

**\*257\***

**Customer:**

**Reference:**

**Approvals:** Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run

Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***

**Sequence ID/  
Work Center ID**

**Operation  
Description**

**Set Up/  
Run Hours**

**Tool ID**

**Tool #**

**Plan  
Code**

**Accept  
Qty**

**Reject  
Qty**

**Reject  
Number**

**Insp.  
Stamp**

170

QC3- Inspect Part Finish

0.00

SMF  
B1118

257

com

**\*170\***

QC

Quality Control

180

Identify as per dwg & Stock Location: 3T469 0.00

0.00

DAS

28

9-89

13-11-19

**\*180\***

Packaging

Packaging

190

QC21- Final Inspection - Work Order Release

0.00

J/RM 13/11/20

**\*190\***

QC

Quality Control

0.00

CMF  
13/11/20

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			<b>DISPOSITION</b>		<b>AGAINST DEPARTMENT/PROCESS</b>					
			<input type="checkbox"/> Rework	<input type="checkbox"/> Skid-tube	<input type="checkbox"/> Crosstube	<input type="checkbox"/> Water Jet			<input type="checkbox"/> Engineering	
			<input type="checkbox"/> Scrap	<input type="checkbox"/> Machining	<input type="checkbox"/> Small Fab	<input type="checkbox"/> Prod. Eng. Coor.			<input type="checkbox"/> Quality	
			<input type="checkbox"/> Use-as-is	<input type="checkbox"/> Thermoforming	<input type="checkbox"/> Finishing	<input type="checkbox"/> Rec/Store/Packaging			<input type="checkbox"/> Other	
			<input type="checkbox"/> Work Order Update	<input type="checkbox"/> Large Fab	<input type="checkbox"/> Composite	<input type="checkbox"/> Supplier				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
<b>FAULT CATEGORY</b>										
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled						

## Picklist Print

Monday, October 28, 2013 10:09:50 AM

Page 1 / 1

**Work Order ID:** 108668  
**Parent Item:** D2230-3 **Start Date:** 10/28/2013 **Required Date:** 10/31/2013  
**Parent Item Name:** Mounting Lug **Start Qty:** 257.00 **Required Qty:** 257.00  
**Comments:** IPP D00.05.18Added inspection level 8, and removed P/O for powder  
coatEC IPP REV :E NEW FOLIO # 10-05-25 JLM VERIFIED  
BY:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2230-3P Lug		Purchased	No				Each	0.0000		257		13/11/01	267
D2423 Lug Extrusion		Manufactured	No				f	491.8000		19		13/11/01	29
<u>Location</u>				<u>Loc Qty</u>			<u>Loc Code</u>						
				MAT006			491.8						
				105422			320						
				87953			171.8						

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only 

Work Order: _____			<b>DISPOSITION</b>		<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____ NCR No. _____			Rework Scrap Use-as-is Suspected Unapproved	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other			
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Design Doc/Data Equip/Tooling Handling/Pre Material Operator Offset/Setup Process Supplier Training Transport Unapproved										
FAULT CATEGORY										
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function		<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			

8

7

6

5

4

3

2

1

D

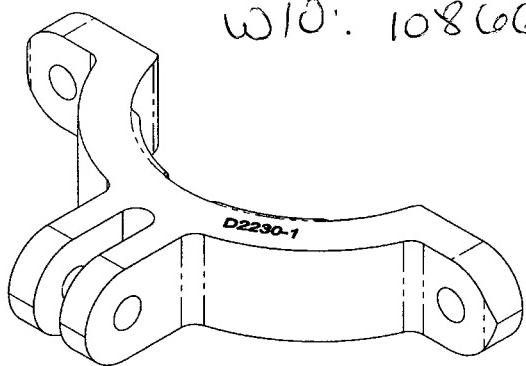
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C

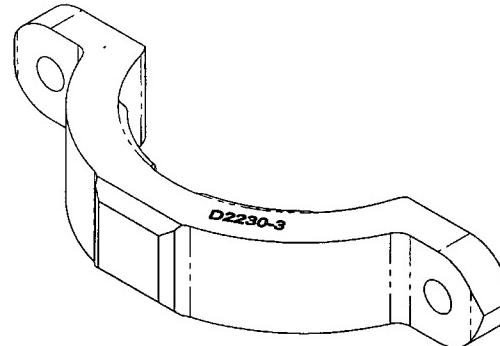
C

B

B



D2230-1 MOUNTING LUG



D2230-3 MOUNTING LUG

RELEASED  
01/01/2016



NOTES:

- 1) MATERIAL: MAKE FROM D2423 EXTRUSION
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
POWDER COAT WHITE (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: ENGRAVE PART NUMBER TO A DEPTH OF 0.010±0.005 IN THIS LOCATION, WITH TOOL TIP RADIUS OF 0.015±0.005.
- 7) WEIGHT: -1: 0.16 lbs  
-3: 0.14 lbs

G	REDRAWN IN SOLIDWORKS TO CURRENT DESIGN STANDARDS. REFER TO SECTION A-A & B-B FILLET ADDED TO PREVENT CHAFING OF RUBBER CUSHION ON INSTALLATION.			AJS	09.01.16
F	REDESIGN; R1.200 WAS 1.100			CP	99.12.13
E	RE-DESIGN			BW	95.01.04
D	RE-DESIGN			BW	95.01.04
C	RE-DESIGN			BW	94.03.30
REV.	DESCRIPTION			BY	DATE
DESIGN	BW	<b>DART AEROSPACE LTD</b>			
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA			
CHECKED	A	DRAWING NO.			REV. G
MFG. APPR.	J	D2230			SHEET 1 OF 3
APPROVED	N/A	TITLE			SCALE
DE APPR.	X	MOUNTING LUG			NTS
DATE	09.01.16			COPYRIGHT © 1994 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE WHATSOEVER OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

8

7

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A

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D

1

C

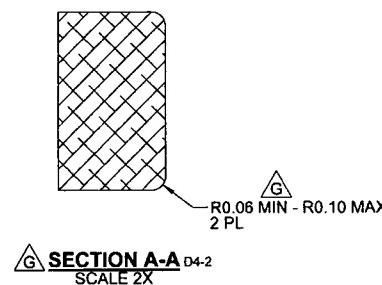
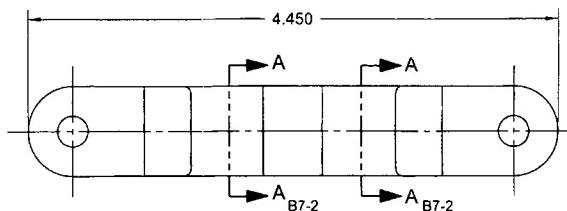
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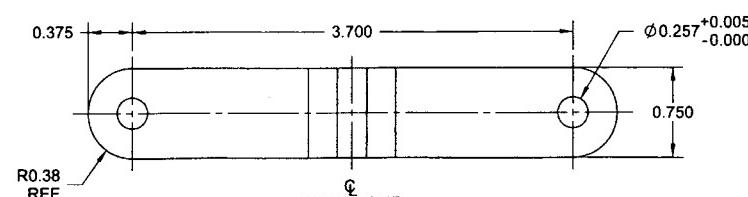
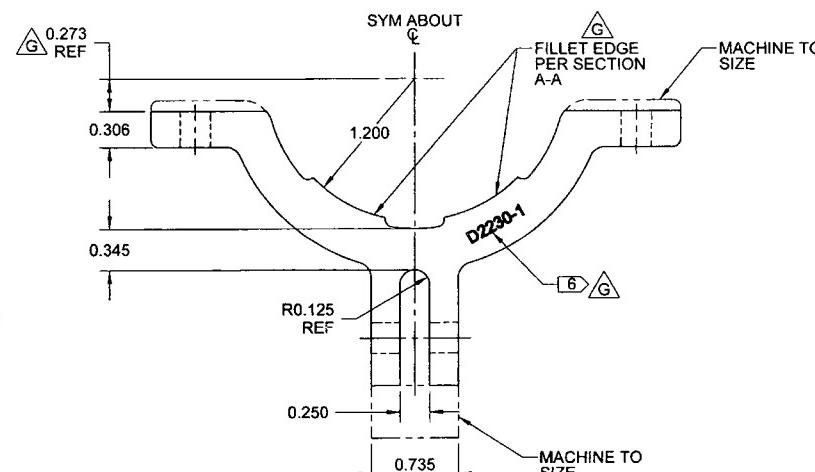
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6

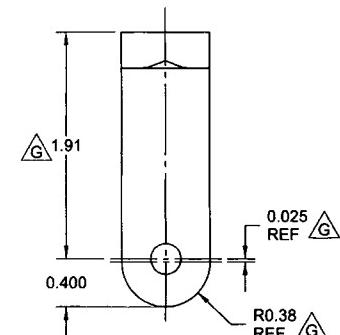
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**G SECTION A-A D4-2**  
SCALE 2X



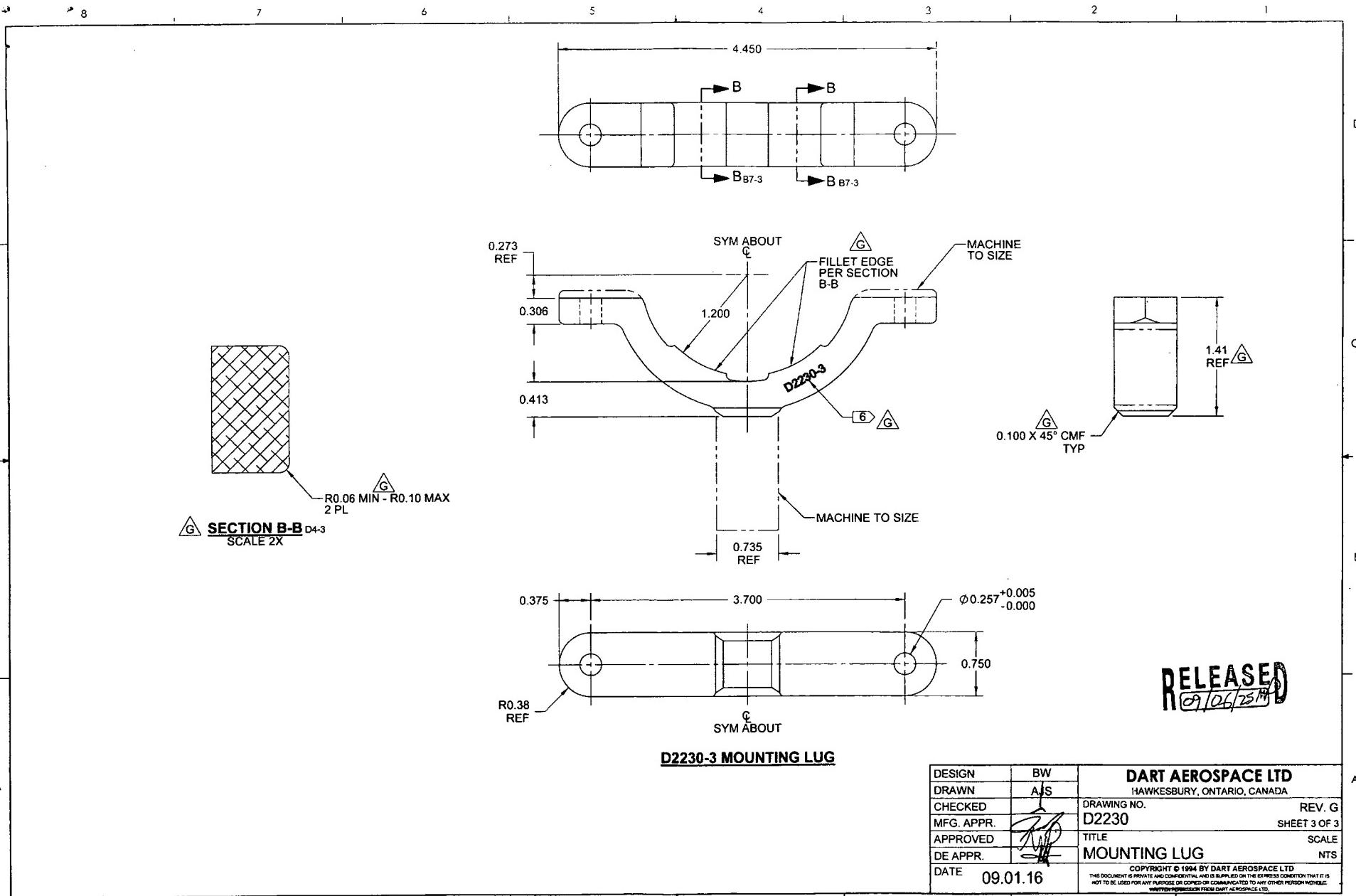
D2230-1 MOUNTING LUG



RELEASED  
09/06/25 AF

DESIGN	BW	DART AEROSPACE LTD		
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA		
CHECKED	<i>SJ</i>	DRAWING NO.	REV. G	
MFG. APPR.	<i>SJ</i>	D2230	SHEET 2 OF 3	
APPROVED	<i>NM</i>	TITLE	SCALE	
DE APPR.	<i>NM</i>	MOUNTING LUG	NTS	
DATE	09.01.16	COPYRIGHT © 1994 BY DART AEROSPACE LTD		
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NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT



DESIGN	BW	DART AEROSPACE LTD
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA
CHECKED		DRAWING NO.
MFG. APPR.		D2230
APPROVED		REV. G
DE APPR.		SHEET 3 OF 3
DATE	09.01.16	TITLE
		SCALE
		NTS
		MOUNTING LUG
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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO21848**

Purchase Order Date 10/28/2013

PO Print Date 10/28/2013

Page Number 1 of 2

**Order From :** VC-MET003

METEC METAL TECHNOLOGY INC.  
20 TERRY FOX DRIVE PO BOX 781  
VANKLEEK HILL, ON K0B 1R0  
CA

**Ship To :** DART AEROSPACE LTD

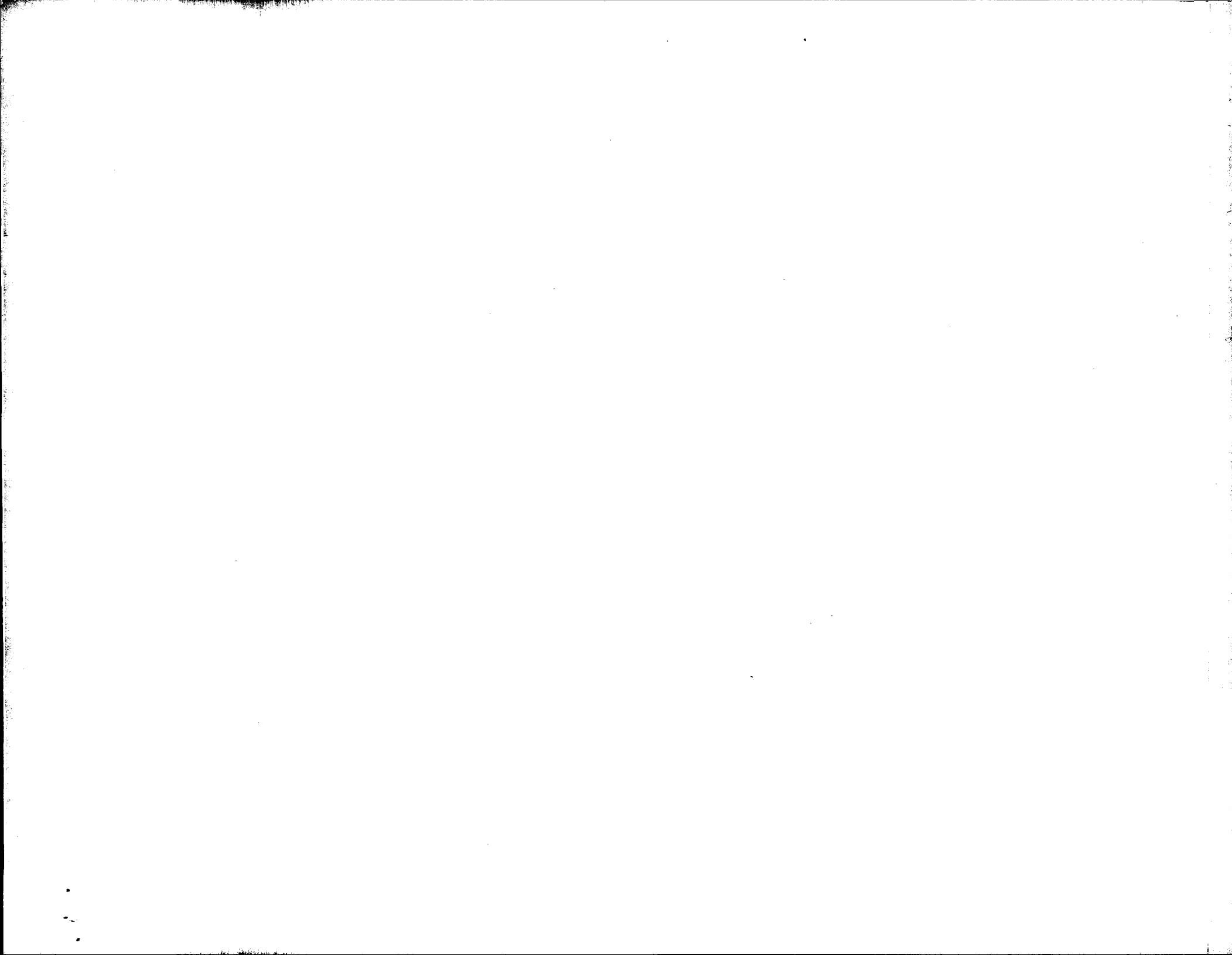
1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

FAXED  
10/28/2013

Contact Name	Buyer	Chantal Lavoie
Vendor Phone	Customer POID	
	Customer Tax #	10127-2607
<b>Ship To Contact</b>	Terms	Net 10
<b>Ship To Phone</b>	Currency	CAD
<b>Ship Via:</b>	<b>FOB</b>	Destination-Collect
<b>Ship Acct:</b>		

Line Nbr	Reference Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	D2230-1P	Lug	10/30/2013 Yes 10/30/2013		149.00 Each	\$18.95	\$2,823.55
	AS PER DWG D2230 REV. G B108669					Line Total:	\$2,823.55
2	D2230-3P	Lug	10/30/2013 Yes 10/30/2013		257.00 Each	\$13.60	\$3,495.20
	AS PER DWG D2230 REV. G B108668					Line Total:	\$3,495.20
3	D3235-1P	Lug	10/30/2013 Yes 10/30/2013		100.00 Each	\$15.05	\$1,505.00
	AS PER DWG D3235 REV. A B108670						

**Note:**



# METEC METAL TECHNOLOGY INC.

20 Terry Fox Drive  
 Vankleek Hill, Ontario K0B 1R0 , Canada  
 Tel: (613) 678-3957  
 Fax: (613) 678-3956

**Delivery Slip No.:** 19314  
**Date:** Oct 28, 2013  
**Page:** 1

Sold to:	Ship to:
Dart Aerospace Ltd.  Att. Micheal Gregoire 1270 Aberdeen Street Hawkesbury, Ontario K6A 1K7	Dart Aerospace Ltd.  Att. Micheal Gregoire 1270 Aberdeen Street Hawkesbury, Ontario K6A 1K7
<b>Order No.:</b> PO21848	<b>Sold By:</b> Dewar, Eric
<b>Shipped By:</b> your truck	<b>Ship Date:</b>

Description	Unit	Ordered quantity	Shipped quantity	Backorder quantity
D2230-1 Mounting Lug	Each		149	
D2230-3 Mounting Lug	Each		257	
D3235-1 Mounting Lug	Each		100	

The delivered goods must be inspected upon receipt to confirm compliance.  
 Should there be discrepancies please notify METEC within 30 days of delivery.  
 The goods are otherwise deemed accepted.

Received by

Thank you for your order!



20 Terry Fox Drive, Vankleek Hill, Ontario K0B 1R0  
Tel. (613) 678-3957 & (613) 678-2782 Fax (613) 678-3956 [metec@metec.ca](mailto:metec@metec.ca)

## CERTIFICATE OF CONFORMITY

SOLD TO:

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, Ont.  
K6A 1K7

SHIPPED TO:

same

QUANTITY	PART NUMBER	PART NAME	P.O. NUMBER
149	D2230-1	Lug	21848
257	D2230-3	Lug	21848
100	D3235-1	Lug	21848

MATERIAL: supplied by DART B93551

We hereby certify that the above parts were made in conformance with applicable drawings.

METEC Metal Technology Inc.

A handwritten signature in black ink, appearing to read "Shigi Walz".

Shigi Walz

Vankleek Hill, October 28, 2013